10/561034 IAP6 Rec'd PCT/PTO 16 DEC 2005

APPLICATION DATA SHEET

Application Information

Application Type::

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Title::

HIP/PAP Polypeptide Composition for Use in Liver

Regeneration and for the Prevention of Liver Failure

Attorney Docket Number::

CHEP:015US

Request for Early Publication?::

Request for Non-Publication?::

No No

Suggested Drawing Figure::

Total Drawing Sheets::

13

Small Entity::

No

Petition Included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Number::

Secrecy Order in Parent Appl?:: No

Inventor Information

Inventor Authority Type::

Inventor

Primary Citizenship Country::

France

Status:

Full Capacity

Given Name::

Laurence

Middle Name::

Family Name::

Christa

Name Suffix::

City of Residence::

Bourg la Reine

Country of Residence::

France

Street::

22. rue Armand Millet

City::

Bourg la Reine

State or Province::

Initial 12/16/2005

1

Country::

France

Postal or Zip Code::

92340

Inventor Authority Type::

Inventor

Primary Citizenship Country::

France

Status:

Full Capacity

Given Name::

Christian

Middle Name::

Family Name::

Berchot

Name Suffix::

City of Residence::

Paris

Country of Residence::

France

Street::

35, boulevard Pasteur

City::

Paris

State or Province::

Country::

France

Postal or Zip Code::

75015

Inventor Authority Type::

Inventor

Primary Citizenship Country::

France

Status:

Full Capacity

Given Name::

Marie-Thérèse

Middle Name::

Family Name::

Simon-Gage-Soufflot

Name Suffix::

City of Residence::

Chaville

Country of Residence::

France

Street::

37, rue Anatole France

City::

Chaville

State or Province::

Country::

France

Postal or Zip Code::

92370

Inventor Authority Type:: Inventor

Primary Citizenship Country:: France

Status: Full Capacity

Given Name:: Alain

Middle Name::

Family Name:: Pauloin

Name Suffix::

City of Residence:: Voisin-le-Bretonneux

Country of Residence:: France

Street:: 16, Villa Astrid

City:: Voisin-le-Bretonneux

State or Province::

Country:: France

Postal or Zip Code:: 78960

Inventor Authority Type:: Inventor

Primary Citizenship Country:: Portugal

Status: Full Capacity

Given Name:: J.

Middle Name:: Guilherme

Family Name:: Tralhao

Name Suffix::

City of Residence:: Coimbra

Country of Residence:: Portugal

Street:: Av. Prof. Elisio de Moura 397 1°C

City:: Coimbra

State or Province::

Country:: Portugal

Postal or Zip Code:: P-3030

Correspondence Information

Correspondence Customer

Number:: 32425

Telephone:: (512) 536-3035

Fax:: (512) 536-4598

Email address:: mbwilson@fulbright.com

Representative Information

Representative Customer

Number:: 32425

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application National Stage of PCT/EP2004/006633 06/18/04

Foreign Priority Information

Country:: Application Number:: Filing Date::

Europe 03291487.1 06/18/03

Assignee Information

Assignee Name:: Institut National de la Santé et de la Recherche

Médicale (INSERM)

Street:: 101, rue de Tolbiac

City:: Paris Cedex 13

State or Province::

Country:: France

Postal or Zip Code:: 75654

Assignee Name:: Universite Rene Descartes

Street:: 12, rue de l'Ecole de la Médecine

City:: Paris

State or Province::

Country:: France

Postal or Zip Code:: 75006